INCOME & EXPENSE STATEMENT



BUSINESS NAME:

DODINESS NAME					
	Period Ending	12/31/	Period Ending 12/31/	YTD Thru	_
Income:					
Revenue/Sales	\$	-	\$ -	\$	-
Other Income	\$	-	\$ -	\$	-
Total Income:	\$	-	\$ -	\$	-
Cost of Goods Sold	\$	-	\$ -	\$	-
Gross Profit:	\$	-	\$ -	\$	-
Expenses:					
Accounting	\$	_	\$ -	\$	
Advertising/Marketing	\$	-	\$ -	\$	_
Bad Debts	\$	_	\$ -	\$	_
Bank Charges	\$	-	\$ -	\$	_
Insurance	\$	-	\$ -	\$	_
Meals and Entertainment	\$	-	\$ -	\$	_
Maintenance and Repairs	\$	-	\$ -	\$	_
Payroll Expenses (Other Employees)	\$	-	\$ -	\$	_
Owner Compensation	\$	-	\$ -	\$	-
Postage	\$	-	\$ -	\$	-
Rent (Business)	\$	-	\$ -	\$	-
Telephone	\$	-	\$ -	\$	-
Utilities	\$	-	\$ -	\$	-
Supplies	\$	-	\$ -	\$	-
Other Expenses**	\$	-	\$ -	\$	-
Total Expenses:	Ś	_	*	s	_
	T		T		
Net Income:	\$		<u>-</u>	\$	-
Interest Expense	\$	-	\$ -	\$	_
Taxes (Business Taxes only)	\$	-	\$ -	\$	_
Depreciation / Depletion	\$	-	\$ -	\$	-
Amortization	\$	-	\$ -	\$	-
Net Income Before Interest, Taxes,					
Depreciation & Amortization (EBITDA):	\$	-	<u> </u>	\$	_
		PLEASE "TAB" THROU	GH ALL FIELDS TO ENSURE FORMULA	S UPDATE PROPERLY	
	** Comments and/or Notes Re	garding Other Expenses:			
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Date:

Signature: